



STATE OF WASHINGTON

WASHINGTON STATE PATROL

PO Box 42633 • Olympia, Washington 98504-2633 • (360) 705-5100

March 31, 2000

TO: Employers and Volunteer Organizations

FROM: Ms. Mary L. Neff, Identification and Criminal History Section

SUBJECT: Washington Access to Criminal History (WATCH)

Thank you for your interest in the Washington Access to Criminal History (WATCH) program. WATCH was initiated in response to the large increase in requests for criminal history information. It provides immediate access to criminal history via the Internet, with payment options designed to meet a variety of organizational needs. Responses are limited to Washington State records only.

Credit Card Payment

Payment for criminal history background checks can now be made by using VISA, MasterCard, Discover or American Express. This option was implemented for organizations and individuals performing a small volume of inquiries, and requires no prior registration or account setup. Procedures for choosing the credit card option are:

- Connect to the WATCH web site at: **[HTTPS://WATCH.WSP.WA.GOV](https://WATCH.WSP.WA.GOV)**
- Carefully read and follow instructions.

Washington State Patrol (WSP) WATCH Billing Account

WSP WATCH billing accounts are used for criminal history background check requests made under RCW 10.97.050 or 43.43.830, for a fee of \$10 per each record search done by name and date of birth. This type of account is for agencies that perform a large number of inquiries.

The following procedures must be completed before using the WATCH system:

- Complete and return enclosed **Account Application Form**.
- Complete and return enclosed **User Application Form** for each potential system user.
- Ensure your Internet technology meets minimum requirements outlined in this letter.
- Upon receipt of the completed application, WSP will assign account and personal identification numbers (PIN) to your agency or organization for each user within 7-14 working days.
- Connect to the WATCH web site at: **[HTTPS://WATCH.WSP.WA.GOV](https://WATCH.WSP.WA.GOV)**
- Carefully read and follow instructions.

Employers and Volunteer Organizations
Page 2
March 31, 2000

Non-Profit Organizations

Non-Profit organizations in Washington State may apply for an account in which Child and Vulnerable Adult (RCW 43.43.830) inquiries may be performed, *at this time, free of charge*. A model is being developed and tested to establish a small user fee to cover the costs of maintaining and improving the WATCH system for non-profit organizations. Guidelines for creating a non-profit account are the same as those for a WSP WATCH Billing Account.

The following are the minimum requirements needed to effectively use the WATCH system:

- Internet browser which supports Secure Socket Layers (SSL); Internet Explorer (IE) 4.0 SP2+; Netscape Navigator 4.X; AOL/IE Browser 4.0 SP2; or others which supports Secure Socket Layers (SSL) and is configured to accept "cookies".
- Access to the Internet through an Internet Service Provider.

If you have any questions regarding criminal history information provided from WATCH, please contact the Identification and Criminal History Section, Customer Service Unit, at (360) 705-5100. For questions concerning technical issues, e-mail watch.help@wsp.wa.gov.

MLN:jtg
Enclosure (2)

Account Application Form

Washington Access to Criminal History (WATCH)



Criminal Records Division

Mail to: WATCH
Identification and Criminal History Section
Post Office Box 42633
Olympia WA 98504-2633

Phone No: (360) 705-5100
Fax No: (360) 570-5275

Each organization must complete an Account Application Form and submit with at least one User Application Form. The WSP will email your assigned account number, user name, and password. **Please Print.**

AGENCY—SEARCH TYPE (select one)

- ☐ NON-PROFIT—Child/Adult Abuse Information (free to registered non-profit agencies)
☐ PROFIT BUSINESS/ORG (\$10.00 FEE) General Criminal or Child/Adult Abuse Information

AGENCY INFORMATION

Contact Name: _____ Federal Tax ID No. (EIN): _____

Organization: _____

Address: _____

Street

Apt./Suite

City

State

ZIP

Phone No.: () _____

Number of background checks expected per month:

Fax No.: () _____

1-10 ☐ 11-25 ☐ 26-50 ☐ 51-100 ☐ 101+ ☐

E-Mail: _____

CERTIFICATION

I certify that the information I have provided on this form is true and complete. I understand I will be billed \$10 (ten dollars) per background check initiated through WATCH regardless of the results of the check and the invoice for this service is payable upon receipt. I also understand that this background check fee will be waived for non-profit organizations registered in Washington State, pursuant to the Child/Adult Abuse Information Act (RCW 43.43.830 through 43.43.845).

Contact Name

Date

Contact Printed Name

Title

User Application Form

Washington Access to Criminal History (WATCH)



Criminal Records Division

Mail to: WATCH
Identification and Criminal History Section
Post Office Box 42633
Olympia WA 98504-2633

Phone No. (360) 705-5100
Fax No. (360) 570-5275

Each user within a registered WATCH organization must complete the following application. The WSP will mail your assigned account number and personal identification number (PIN) within **7-14** working days.

Please Print.

USER INFORMATION

User Name: _____
First Middle Initial Last

Address: _____
Street Apt./Suite

_____ City State ZIP

Phone No.: () E-Mail Address _____

_____ User Signature _____ Date _____

_____ User Printed Name _____ Title _____

REGISTERED ORGANIZATION

Organization: _____ Account No.: _____
(Please provide the account number if adding a user to an existing account)

Contact Name: _____

Phone No.: () Fax No.: ()

CERTIFICATION

I certify that the information I have provided on this form is true and complete. I understand that I will be billed \$10 (ten dollars) per background check initiated through WATCH, regardless of the results of that check, and that the invoice for this service is payable upon receipt. I also understand that this background check fee will be waived for non-profit organizations registered in Washington State, pursuant to the Child/Adult Abuse Information Act (RCW 43.43.830 through 43.43.845).

User Signature _____ Date _____

CHILD/ADULT ABUSE RECORD SEARCH GUIDELINES

Refer to Revised Code of Washington (RCW) 43.43.830-43.43.845 for complete information.

Child/Adult Abuse Background checks may be conducted only by Washington State business, organizations or individuals, all other states must conduct searches under the Criminal Records Privacy Act.

1. ***Searches can be conducted only on prospective employees, volunteers or adoptive parents. (For current employees or volunteers, see note below.)***

Background checks can be requested on **prospective employees, volunteers or adoptive parents** who will or may have unsupervised access to children under sixteen years of age, developmentally disabled persons, or vulnerable adults. The background check is for **initial employment or engagement decisions only**.

2. ***Applicants must be notified an inquiry may be made.***

A business or organization shall not make an inquiry to the Washington State Patrol unless the business or organization has **notified the applicant**, who has been offered a position as an employee or volunteer, **an inquiry may be made**.

3. ***A signed disclosure statement is required from applicant before a search is conducted.***

A business or organization **shall require each applicant to disclose** to the business or organization whether the applicant has been:

- (a) convicted of any crime against children or other persons;
- (b) convicted of crimes relating to financial exploitation if the victim was a vulnerable adult;
- (c) convicted of crimes related to drugs as defined in RCW 43.43.830;
- (d) found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor;
- (e) found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor;
- (f) found in any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person or to have abused or financially exploited any vulnerable adult;
- (g) found by a court in a protection proceeding under chapter 74.34 RCW, to have abused or financially exploited a vulnerable adult.

The disclosure shall be made in writing and signed by the applicant and sworn under penalty of perjury.

The disclosure sheet shall specify all crimes against children or other persons, all crimes relating to drugs, and all crimes relating to financial exploitation as defined in RCW 43.43.830 in which the victim was a vulnerable adult.

4. ***Applicants must be notified of the response.***

The requesting agency shall notify the applicant of the state patrol's response within ten days after receipt. The employer shall provide a copy of the response to the applicant and shall notify the applicant of such availability.

Notes

- The business or organization shall use this record only in making the initial employment or engagement decision. Further dissemination or use of the record is prohibited. A business or organization violating this subsection is subject to a civil action for damages.
- Background checks pursuant to the Child and Adult Abuse Information Act do not expire and therefore should not be conducted routinely.
- Background checks on current employees or volunteers should be done through the Criminal Records Privacy Act, RCW 10.97.
- Responses are limited to **Washington State records** only.